

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

PROGRAMMABLE GRAY-SCALE LIQUID CRYSTAL DISPLAY

the specification of which

(check one)  is attached hereto.  was filed on \_\_\_\_\_ as  
Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)	Priority Claimed
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(Number)	(Country)	(Day/Month/Year Filed)	Yes	No
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (list name and registration number), and hereby certify that the Government of the United States has the irrevocable right to prosecute this application:

3 Harvey Fendelman, 27,030 Thomas Glenn Keough, 24,295 Eric James Whitesell, 38,657

SEND CORRESPONDENCE TO: DIRECT TELEPHONE CALLS TO: ERIC JAMES WHITESELL (619)553-3001  
COMMANDING OFFICER, LEGAL COUNSEL FOR PATENTS, CODE 0012,  
NCCOSC RDTE DIV, 53510 SILVERGATE AVENUE RM 103, SAN DIEGO, CA 92152-5765

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Stephen D. Russell

Inventor's signature Stephen D. Russell

16 August 1995  
Date

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San Diego, CA 92111

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Full name of second joint inventor, if any Randy L. ShimabukuroSecond Inventor's signature Randy L. Shimabukuro

16 August 1995

Date

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Full name of third joint inventor, if any \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date

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Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of fourth joint inventor, if any \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of fifth joint inventor, if any \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of sixth joint inventor, if any \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of seventh joint inventor, if any \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of eighth joint inventor, if any \_\_\_\_\_

Second Inventor's signature \_\_\_\_\_

Date

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_